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CONFIRMATION NO. 8478

SERIAL NUMBER 10/646,473	FILING OR 371(c) DATE 08/21/2003 RULE	CLASS 358	GROUP ART UNIT 2625	ATTORNEY DOCKET NO.	
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** CONTINUING DATA *****					
** FOREIGN APPLICATIONS *****					
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/17/2003					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		STATE OR COUNTRY WA	SHEETS DRAWING 34	TOTAL CLAIMS 4	INDEPENDENT CLAIMS 2
ADDRESS 22971					
TITLE ELECTRONIC INK PROCESSING					
FILING FEE RECEIVED 986	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		